Case 17-23464-KCF Doc 57 Filed 05/01/18 Entered 05/01/18 16:05:34 Desc Main

Fill in this info	ormation to identify your	case:	
Debtor 1	Edwin Cruz Ferna	ando	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	17-23464		
(if known)			

■ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	320,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,055.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	355,055.0
aı	t 2: Summarize Your Liabilities		
			iabilities nt you owe
<u>2</u> .	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	430,584.8
<b>3.</b>	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	241,683.0
	Your total liabilities	\$	672,267.82
<sup>o</sup> ai	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,575.28
j.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,424.7
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
<b>7</b> .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	hox and s	submit this form to

the court with your other schedules.

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Debtor 1 Edwin Cruz Fernando

Document

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

12,277.67

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	134,543.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	134,543.00

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Fill in this info	rmation to identify your	case:		
Debtor 1	Edwin Cruz Ferna	ando		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	17-23464			
(if known)				■ Check if this is an
				amended filing

### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	s NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have that they are true and correct.	read the summary and schedules filed with this declaration and
X /s/ Edwin Cruz Fernando	X
Edwin Cruz Fernando Signature of Debtor 1	Signature of Debtor 2
Date <b>May 1, 2018</b>	Date

Fill in this inforr	nation to identify your case:
Debtor 1	Edwin Cruz Fernando
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: District of New Jersey
Case number (if known)	17-23464

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

■ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 12.277.67 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 Gross receipts (before all deductions) \$ -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

17-23464

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 12,277.67 0.00 12,277.67 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 12.277.67 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 12,277.67 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 12,277.67 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 147,332.04 15b. The result is your current monthly income for the year for this part of the form.

**Edwin Cruz Fernando** 

Debtor 1

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Debtor 1 Edwin Cruz Fernando Case number (if known) 17-23464

16	Calculate the median family income that applies to	ou. Follow these steps:	
	16a. Fill in the state in which you live.	NJ	
	16b. Fill in the number of people in your household.	6	
	16c. Fill in the median family income for your state and	size of household.	<sub>\$</sub> 135,497.00
	To find a list of applicable median income amounts instructions for this form. This list may also be ava	s, go online using the link specified in the	
17	How do the lines compare?	. ,	
	17a. Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		ox 1, Disposable income is not determined under le Income (Official Form 122C-2).
		lation of Your Disposable Income (Of	osable income is determined under 11 U.S.C. § ficial Form 122C-2). On line 39 of that form, copy
Par	3: Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)	
18.	Copy your total average monthly income from line 1	1	\$\$
19.	contend that calculating the commitment period under 1 spouse's income, copy the amount from line 13.	1 U.S.C. § 1325(b)(4) allows you to ded	uct part of your
	19a. If the marital adjustment does not apply, fill in 0 on	line 19a.	-\$0.00
	19b. Subtract line 19a from line 18.		\$12,277.67
20.	Calculate your current monthly income for the year.	Follow these steps:	
	20a. Copy line 19b		\$12,277.67_
	Multiply by 12 (the number of months in a year).		<b>x</b> 12
	20b. The result is your current monthly income for the y	ear for this part of the form	\$ <u>147,332.04</u>
	20c. Copy the median family income for your state and	size of household from line 16c	\$ 135,497.00
	21. How do the lines compare?		
	Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the court, on the top of pa	ge 1 of this form, check box 3, The commitment
	Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	lless otherwise ordered by the court, on	the top of page 1 of this form, check box 4, The
Par	4: Sign Below		
	By signing here, under penalty of perjury I declare that	he information on this statement and in	any attachments is true and correct.
)	/ /s/ Edwin Cruz Fernando		
	Edwin Cruz Fernando Signature of Debtor 1		
	Date <b>May 1, 2018</b>		
	MM / DD / YYYY		
	If you checked 17a, do NOT fill out or file Form 122C-2.	his form. On line 20 of that form	our ourrent monthly income from line 4.4 charge
	If you checked 17b, fill out Form 122C-2 and file it with	ins ionn. On line 39 of that form, copy yo	our current monthly income from line 14 above.

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Fill in this info	rmation to identify your case:	
Debtor 1	Edwin Cruz Fernando	
Debtor 2 (Spouse, if filing	a)	
United States E	Sankruptcy Court for the: District of New Jersey	
Case number (if known)	17-23464	■ Check if this is an amended fil

Official Form 122C-2

### Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

6

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 2,300.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Document Page 8 of 15 **Edwin Cruz Fernando** 17-23464 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 Χ 6 7c. Subtotal. Multiply line 7a by line 7b. 294.00 Copy here=> 294.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 294.00 294.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 738.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 2,404.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Chase 300.00 **Chase Manhattan Mortgage** 2,713.19 Copy Repeat this amount 3,013.19 3,013.19 9b. Total average monthly payment on line 33a. Net mortgage or rent expense

	Not mortgage of forte expense.
	Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

0.00 0.00 here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

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Edwin Cruz Fernando 17-23464 Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 598.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. **Describe Vehicle 1:** Vehicle 1 2014 Nissan Juke 40,000 miles daughter pays and drives 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **GMAC** 433.00 Repeat this Copy amount on line 33b. Total Average Monthly Payment 433.00 433.00 Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 52.00 52.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 485.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-\$ Copy Repeat this here amount on line 33c. Total average monthly payment 0.00 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 485.00 485.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Edwin Cruz Fernando Case number (if known) 17-23464

Oth	er Necessary Expenses	In addition to the expense the following IRS categories		ns listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, so your pay for these taxes. H	mount that you will actually cial security taxes, and Med lowever, if you expect to recome the total monthly amou	pay for fe licare taxe ceive a tax	es. You may ind c refund, you m	nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	2,814.00
17.	Involuntary deductions:	•	ductions t	hat your job re	quires, such as retirement	_	
	contributions, union dues,		oh such:	as voluntary 40	01(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total	monthly premiums that you	pay for yo	our own term life	e insurance. If two married people are	_	
		,			urance. g spouse's life insurance, or for any form	\$	292.20
19.		h as spousal or child suppo	rt paymer	nts.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	-			_	· —	
	as a condition for your j						
	for your physically or m	entally challenged depende	ent child if	no public educ	ation is available for similar services.	\$	0.00
21.		nly amount that you pay for or any elementary or second			sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the hea by a health savings account	th and welfare of you or you nt. Include only the amount	ur depend that is mo	ents and that is re than the tota		\$	629.00
23	•	nce or health savings acco			you pay for telecommunication services	Ψ_	
	phone service, to the exter income, if it is not reimburs Do not include payments for	nt necessary for your health ned by your employer. or basic home telephone, in	and welfa	are or that of you	special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment nount you previously deducted.	+\$	360.00
24.	Add all of the expenses and Add lines 6 through 23.	allowed under the IRS exp	ense allo	wances.		\$	8,562.20
Add	litional Expense Deduction	These are additional Note: Do not include					
25.					nses. The monthly expenses for health oly necessary for yourself, your spouse, o	r	
	Health insurance		\$	771.06			
	Disability insurance		\$	211.76			
	Health savings account		+ \$	0.00			
	Total		\$	982.82	Copy total here=>	\$	982.82
	Do you actually spend this						
	_ ' ' '						
	No. How much do	ou actually spend?	•				
26.	Yes  Continued contributions continue to pay for the real your household or membe	to the care of household sonable and necessary care of your immediate family w	e and sup vho is una	port of an elder ble to pay for s	e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$	0.00
	Yes  Continued contributions continue to pay for the rearyour household or member include contributions to an Protection against family	to the care of household sonable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably	or family e and sup who is una program	port of an elder ble to pay for s . 26 U.S.C. § 5 y monthly expe	rly, chronically ill, or disabled member of such expenses. These expenses may 329A(b) enses that you incur to maintain the	\$	0.00
	Continued contributions continue to pay for the rearyour household or membe include contributions to an Protection against family safety of you and your fam	to the care of household sonable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably	or family e and supp who is una program necessary	port of an elder ble to pay for s . 26 U.S.C. § 5 y monthly expe tion and Service	rly, chronically ill, or disabled member of such expenses. These expenses may 329A(b)	\$	0.00

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ebtor 1	Edwin Cruz Fernando		ase number ( <i>if kn</i> e	own)	17-2	3464			
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	ce and operat	ting e	xpense	es on			
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy co lergy costs	sts included i	n exp	enses	on line	;		
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must	show that the	e ado	litional		\$	S	0.00
29.	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The monthly pendent children who are younger than 18 y	y expenses ( vears old to a	not m ttend	ore tha a priva	an ate or			
	You must give your case trustee documents claimed is reasonable and necessary and r	ation of your actual expenses, and you must oot already accounted for in lines 6-23.	explain why	the a	mount				
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or a	after the date	of ad	justme	nt.	\$	S	0.00
30.		he monthly amount by which your actual foo allowances in the IRS National Standards. s in the IRS National Standards.							
		ional allowance, go online using the link spe so be available at the bankruptcy clerk's offic		separa	ate				
	You must show that the additional amount of	claimed is reasonable and necessary.					\$	S	79.00
31.	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga	amount that you will continue to contribute nization. 11 U.S.C. § 548(d)(3) and (4).	in the form of	cash	or fina	ancial			
	Do not include any amount more than 15%	of your gross monthly income.					\$	<u> </u>	250.00
32.	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$		1,311.82
Ded	uctions for Debt Payment								
Dea	dottono for Debt i dyment								
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines	•							
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually d							
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines  To calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractually d							monthly
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for ba	33a through 33e. ent, add all amounts that are contractually d nkruptcy. Then divide by 60.	ue to each se	ecure	d	=>		ment	monthly
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for ba	33a through 33e. ent, add all amounts that are contractually d	ue to each se	ecure	d	>	pay	ment	
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually d nkruptcy. Then divide by 60.	ue to each se	ecure	d 	'	pay	ment	
33. I	For debts that are secured by an interest oans, and other secured debt, fill in lines To calculate the total average monthly paymereditor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles Copy line 13b here	33a through 33e. ent, add all amounts that are contractually d nkruptcy. Then divide by 60.	ue to each se	ecure	d	'	\$	ment	,013.19
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33. II 33a. 33b. 33c. 33d.	For debts that are secured by an interest coans, and other secured debt, fill in lines for calculate the total average monthly paym creditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually d nkruptcy. Then divide by 60.	ue to each se	Does inclu or in	s paym de taxe suranc No Yes	=> => ent	\$ _ \$ _ \$ _ \$ _ \$	ment	433.00
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**Edwin Cruz Fernando** Debtor 1 Case number (if known) 17-23464 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount  $\div 60 = \$$ -NONE-\$ Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Tyes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 \$ 0.00 36. Projected monthly Chapter 13 plan payment 350.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 10.00 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 35.00 35.00 here=> Average monthly administrative expense 3.481.19 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 8,562.20 expense allowances Copy line 32, All of the additional expense deductions 1,311.82 Copy line 37, All of the deductions for debt payment 3,481.19 13,355.21 13,355.21

Copy total here=>

Total deductions.....

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Debtor 1	<b>Edwin Cruz</b>	Fernando		Case	number (if k	(nown) 17	-23464			
Part 2:	Determine Y	our Disposable Income Under 1	1 U.S.C. § 1325(b)(	2)						
39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.							\$	12,277.67		
40. Fill in any reasonably necessary income you receive for support for dependen children. The monthly average of any child support payments, foster care payments disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.					\$	0.	00			
41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).					\$	0.	00			
42. <b>Tot</b>	al of all deduc	tions allowed under 11 U.S.C. §	<b>707(b)(2)(A).</b> Copy	line 38 here=>	\$	13,355.	21			
43. <b>Deduction for special circumstances.</b> If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.										
Describe the special circumstances				Amount of exper	ise					
			\$							
	\$									
			\$							
			Total \$	0.00	Copy here=> \$	<b>.</b>	0.00			
44. <b>To</b> t	tal adjustment	s. Add lines 40 through 43.		=> \$	13,	355.21	Copy here=> -\$	13,355.21		
	·	onthly disposable income under	§ <b>1325(b)(2).</b> Subtr	act line 44 from lin	e 39.		\$	-1,077.54		
Part 3:	Change in II	ncome or Expenses								
hav tim you	ve changed or a e your case will u filed your petit	e or expenses. If the income in Foure virtually certain to change after be open, fill in the information belion, check 122C-1 in the first colur fill in when the increase occurred,	the date you filed you. For example, if ton, enter line 2 in the	our bankruptcy peti he wages reported e second column,	tion and dincrease	during the ed after				
Form	Line	Reason for change		Date of change		ease or ease?	Amount of o	change		
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1				_	ncrease ecrease ncrease ecrease ncrease	\$ \$			
<b>1</b> 220	 C-1				_ 🔲 Ir	ncrease	\$ \$			
1220	J-Z					ecrease	Ψ			

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Debtor 1	Edwin Cruz Fernando	Case number (if known)	17-23464	
Part 4:	Sign Below			
l	By signing here, under penalty of perjury you declare that the informat	ion on this statement and in any att	achments is true and correct.	

X /s/ Edwin Cruz Fernando
Edwin Cruz Fernando

Signature of Debtor 1

Date May 1, 2018 MM / DD / YYYY

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Debtor 1 Edwin Cruz Fernando Case number (if known) 17-23464

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 08/01/2017 to 01/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: JP Morgan Chase

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$92,438.52 from check dated 7/31/2017. Ending Year-to-Date Income: \$153,688.52 from check dated 12/31/2017.

This Year:

Current Year-to-Date Income: \$12,416.00 from check dated 1/31/2018 .

Income for six-month period (Current+(Ending-Starting)): \$73,666.00 .

Average Monthly Income: \$12,277.67.